



001001P Rev. 6/95  <b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b>	U.S. Department of Commerce Patent and Trademark Office		Attorney Docket Number	9500-1
			First Named Inventor	KAN
	COMPLETE IF KNOWN			
			Application Number	
			Filing Date	
		Group Art Unit		
		Examiner Name		
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing    OR <input type="checkbox"/> Declaration Submitted after Initial Filing				

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**A NONINVASIVE BLOOD PRESSURE MEASURING METHOD AND APPARATUS**

(Title of the invention)

This specification of which



is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

04/21/2000

as United States Application Number or PCT International

Application Number

PCT/CN00/00097

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code 119(a)-(d) or 35(b)(3) of any foreign application(s) for patent or inventor's certificate or 35(d)(4) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
92105671.X	China	04/21/89	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
93208086.X	China	04/21/89	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

**Examiner's Statement:** This form is estimated to take 4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES ON COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## DECLARATION

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I hereby claim benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT International application (re-granted the United States of America, filed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT International application in the manner provided in the first paragraph of Title 35, United States Code §112), I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Patent Application Number	PCT Patent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/CN/00/00097	04/21/2000	

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and division applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Firm Name OR <input checked="" type="checkbox"/> List attorney(s) and/or agent(s) name and registration number below	Customer Number of label
---	--------------------------

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☐ Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made in the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Name of Sole or First Inventor:		A petition has been filed for this unsigned inventor	
Given	Jie	Middle Initial	
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☐ Additional Inventors are being named on supplemental sheet(s) attached hereto.